This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0001 CUSTOMER NUMBER: 1016

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Department Of Comparative Med.

University Of Washington

Box 357190

Telephone:

(206)543-8047

Seattle, WA 98195

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBEF OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|--|
| 4. Dogs | | 23 | 89 | | 112 |
| 5. Cats | | 21 | 13 | | 34 |
| 6. Guinea Pigs | 18 | 26 | 76 | | 102 |
| 7. Hamsters | 9 | 99 | | | 99 |
| 8. Rabbits | 25 | 603 | 844 | | 1447 |
| 9. Non-human Primate | 191 | 705 | 226 | | 931 |
| 0. Sheep | | 57 | 116 | | 173 |
| 1. Pigs | | 71 | 190 | | 261 |
| 2. Other Farm Animais | | | | | |
| 3. Other Animals | | | : | | ! |
| Gerbils | | 66 | 17 | | 33 |
| Ferrets | _ | | 10 | | 10 |
| Armadillos | | | 16 | | - 16 |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

| CERTIFICATION BY | ority to ensure the provision of adequate veterinary care and to oversee the adequacy of other asp / HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official) | ects of animal ca |
|---|---|-------------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print John A. Coulter Executive Director of Health Sciences Adm. | DATE SIGNED |
| APHIS FORM 7023 (Replaces VS FORM 18-23 (OCT 88), which is obsolete. (AUG 91) | Associate Vice President for Medical Affair | rs |

See attached form for additional information CC . 1. 11-019

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0002 CUSTOMER NUMBER: 1026

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Washington State University Laboratory Animal Res. Center PO Box 641165

Telephone: (509)335-6246

Pullman, WA 99164 - 1165

SEE ATTACHED LIST

FACILITY LOCATIONS (Sites) - See Atached Listing

3. REPORTING FACILITY (List all locations where animals were noused or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or une of bain-resteving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|--|
| 4. Dogs | 19 | 91 | 53 | 0 | 144 |
| 5. Cats | 6 | 14 | 6 | 0 | 20 |
| 6. Guinea Pígs | 0 | 12 | 0 | . 0 | 12 |
| 7. Hamsters | 0 | 0 | 37 | 0 | 37 |
| 8. Rabbits | 0 | 70 | 81 | 0 | 151 |
| 9. Non-human Primate | 0 | 0 | 0 | 0 | 0 |
| 0. Sheep | 0 | 1 | 0 | 0 | : 1 |
| 1. Pigs | 0 | 1 | 53 | 0 | 54 |
| 2. Other Farm Animals | | | | | |
| Horses | 0 | 36 | 0 | 0 | 36 |
| Cattle | 0 | 47 | 0 | 0 | 47 |
| /Camelids | 0 | 15 | 0 | . 0 | 15 |
| 13. Other An | imals | | | | |
| , Gerbils | 346 | 106 | 233 | -0 | 339 |

1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility. NOV 2 1 2000

2) Each principal investigator has considered alternatives to painful procedures.

3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

George A. Hedge - Vice Provost for Research

11/20/00

APHIS FORM 7023

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. REGISTRATION NO. 91-R-0002

include Zip Code)

FORM APPROVED OMB NO 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Washington State University Laboratory Animal Resource Center PO Box 641165

Pullman, WA 99164-1165 (509) 335-6246

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA

| REPORT OF ANIMALS USED BY OF | UNDER CONTROL OF | RESEARCH FACILITY | Attach adiditional sheets if ne | cessary or use this form) | |
|--|---|---|---|---|--|
| A. Animals Covered By The Animal Welfare Regulations 12. &OR 13. Other (List by species) | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, disfress, or use of pain- relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquillzing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An application of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report). | TOTAL NO OF ANIMALS (Cols. C + D + E) |
| 13. Other Animal | s CONT | | | | |
| E1k | 1 | 0 | 0 | 0 | 0 |
| Bighorn Sheep | 0 | 37 | 0 | 0 | 37 |
| Caribou | 0 | 30 | 0 | 0 | 30 |
| Grizzly Bears | 1 | 8 | 8 | 0 | 16 |
| Duikers | 0 | 0 | 5 | 0 | 5 |
| Porcupines | 0 | 0 | 11 | 0 | 11 |
| Mink | 0 | 15 | 0 | 0 | 15 |
| Raccoons | 0 | 0 | 4 | 0 | 4 |
| Deer Mice | 133 | 12 | 0 | 0 | 12 |
| Montane Voles | 0 | 5 | 0 | 0 | 5 |
| Cougars | 0 | 15 | 0 | 0 | 15 |
| | | | | | |
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Professionally acceptable standards governing the care, treatment, and use of animals, including approriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, festing, surgery, or experimentation were followed by this research facility.

2). Each principal investigator has considered alternatives to painful procedures.

2). Each principal investigator has considered atternatives to paintiff procedures.

3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and inumber of animals affected

4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of

CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143) SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) DATE SIGNED 11/20/00 George A. Hedge - Vice Provost for Researdh

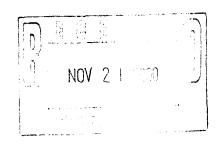
Block #3 of APHIS Form #7023

WASHINGTON STATE UNIVERSITY ANIMAL FACILITY RESEARCH LOCATIONS USDA License #91-R-0002

For Reporting Period 10/1/99 - 9/30/00

*USDA-regulated species are housed in the facilities typed in bold print

- 1. Animal Resource Unit Bustad and ABDF buildings
- 2. Animal Resource Unit Large Animal Barns, Pastures and Pens
- 3. Avian Health Laboratory Puyallup, WA
- 4. Bear Facility NRS
- 5. Beef Center & Wawaii Pastures College of Ag.
- 6. Bighorn Sheep/Wildlife Pens College of Veterinary Medicine
- 7. Carver Farm Fish Facilities
- 8. Cattle Feeding & Reproduction Facilities and Bovine Barn #146
- 9. College Hall Vivarium
- 10. Dairy Center College of Ag.
- 11. Eastlick Hall Amphibian, Reptile and Fish Facilities
- 12. Eastlick Hall BL2 Facility
- 13. Eastlick Hall Vivarium
- 14. Experimental Animal Laboratory Building
- 15. Field Study Sites In Washington and Idaho



- 16. Heald Hall Aviary Facilities
- 17. Hilltop Stables
- 18. Johnson Tower Vivarium
- 19. McCoy Hall College of Vet. Med. Small and Large Animal Facilities
- 20. Rodent Facility Prosser, WA
- 21. Rodent Facility Vancouver, WA
- 22. Science Hall Amphibian, Reptile and Aviary Facilities
- 23. Small Mammal Facility
- 24. Swine Center College of Ag.
- 25. Veterinary Teaching Hospital
- 26. Wegner Hall Vivarium & Satellite Rodent Facilities

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

See attached form for additional information 11-30/01

This report is required by law (7 USC 2143). Failure to report according to the regulations

Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0003 CUSTOMER NUMBER: 1017

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

The Hope Heart Institute

528 18th Avenue Telephone:

(206)320-2001

Seattle, WA 98122

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Α. | B. Number of | · | D. Number of animals | nal sheets if necessary or use APHIS Form 7023A) E. Number of animals upon which teaching, | F. |
|---|--|---|---|---|--|
| Animals Covered By The Animal Welfare Regulations | animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs. | upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | experiments, research, surgery or lests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | TOTAL NUMBEF OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | 8 | 2 | 31 | 0 | 33 |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | | | | |
| 8. Rabbits | | | | | |
| 9. Non-human Primate | | : | | | |
| 0. Sheep | | | | | |
| 1. Pigs | | | | | |
| 2. Other Farm Animals | | | | | |
| 3. Other Animals | : | | | | |
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- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to Identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

| 4) The attending veterinarian for this research | facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequa | cy of other aspects of animal ca |
|--|---|---------------------------------------|
| | CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) | |
| SIGNATURE OF CAO. OR INSTITUTIONAL OFFICE AND VILLE OF THE CONTROL | | DATE SIGNED |
| APHIS FORM 7023 (Replaces VS FORM 18-2 | 23 (OCT 88), which is obsdiete | · · · · · · · · · · · · · · · · · · · |

(AUG 91)

See reverse side for additional information

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA.

Interagency Report Control No 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

FORM APPROVED OMB NO. 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT

OF RESEARCH FACILITY

(TYPE OR PRINT)

| REPORT OF ANIMALS USED BY O | R UNDER CONTROL OF | F RESEARCH FACILITY | (¡Attach adiditional sheets if ne | Cessary or use this form) | |
|---|---|--|---|---|--|
| A. Animals Covered By The Animal Welfare Regulations 12 3/OR 13 Other (Ust by species) | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the unimals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report). | F TOTAL NO OF ANIMALS (Cols. C + D + E) |
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| ACCUPATION STATEMENTS | | | | H HAR. 2 11 12 12 22 22 22 | |
| ASSURANCE STATEMENTS | | | | | |

- 1). Professionally acceptable standards governing the care, treatment, and use of animals, including approxiate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, leaching, testing, surgery, or experimentation were followed by this research facility.
- 2). Each principal investigator has considered alternatives to painful procedures.
- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

| CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143). | | | | |
|---|--|-------------|--|--|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED | | |

Customer ID and Site Address:

Cust ID: 1017

528 18th Avenue Seattle, WA 98122 County: King Telephone (506)320-2001

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USDA, APRIS, AC Shoraueano da

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information

11-29-00 Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0006 1018 CUSTOMER NUMBER:

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Battelle Mem. Inst., Richland Site

P. O. Box 999, K4-13

Telephone: 5

Richland, WA 99352

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | USED BY OR UNDER | CONTROL OF RESEARCH | FACILITY (Attach addition | nal sheets if necessary or use APHIS Form 7023A) | |
|---|--|---|--|---|---|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animats upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | | | : | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | : | THE STATE OF THE S | | |
| 8. Rabbits | | | *** ********************************** | | |
| 9. Non-human Primate | | | | | |
| 0. Sheep | | | | | |
| 1. Pigs | | : | | | |
| 2. Other Farm Animals | | | | | - |
| | | No reportable | species FY2000 |) | [|
| 3. Other Animals | | | | | |
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ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC), A summary of all such exceptions is attached to this annual report, In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| | I BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ive Officer or Legally Responsible Institutional Official) | |
|--|---|----------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL Thomas S, Tenforde | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print Dr. Thomas S. Tenforde Senior Chief Scientist | 11-21-00 |

Customer ID and Site Address:

Cust ID: 1018

Life Sciences Laboratory I, Cypress Telephone **5** (509)375-29**7**7

Richland, WA 99352 County: Benton

Life Sciences II 902. Bartle Blød Richland WA 99352 County Banton

See attached form for additional information Interagency Report Control No.:

1-ac - 2-4

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0007 CUSTOMER NUMBER: 1019

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Virginia Mason Research Center

1201 Ninth Avenue

Telephone:

(206) 583-6525

Seattle, WA 98101

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal | B. Number of animals being bred, conditioned, or held for use in | C. Number of animals upon which teaching, research, experiments, or | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted | Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would | F. TOTAL NUMBER |
|-----------------------------------|--|---|---|--|--------------------------|
| Welfare Regulations | teaching, testing, experiments, research, or surgery but not y | tests were conducted involving no pain, distress, or use of pain- relieving drugs. | involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | (COLUMNS C+D+E) |
| 4. Dogs | 0 | | 0 | | |
| 5. Cats | 0 | 0 | 0 | 0 | 0 |
| 6. Guinea Pigs | | | 0 | <u> </u> | |
| 7. Hamsters | 0 | 0 | D | | O |
| 8. Rabbits | 0 | | 0 | 0 | |
| 9. Non-human Primate | 0 | 0 | 0 | | 0 |
| 0. Sheep | 0 | 0 | 0 | 6 | 0 |
| 1. Pigs | ٥ | 0 | 0 | . 0 | |
| 2. Other Farm Animals | | Ŏ | 0 | \Diamond | 0 |
| | | | : | 0 | |
| 3. Other Animals | | | : | | |
| Mice | | 75 | 200 | | 275 |
| | | | | (F) 2 @ 3 87 3 F) | ; |
| ASSURANCE STATEMENTS | 6 | | | | |
| | | | l use of animals, including approproved by this research facility. | riate use of anestetic, analgesic, and tranquilizing drugs, pric | or to, during, and follo |
| 2) Each principal inves | tigator has considered | alternatives to painful proce | edures. | JEI 7 0 2000 | |

| 4) The attending veterinarian for this research facility has appropriate authority | to ensure the provision of adequate veterinary care and to oversee the adequacy of of | ner aspects of animal ca |
|--|---|--------------------------|
| | EADQUARTERS RESEARCH FACILITY OFFICIAL icer or Legally Responsible Institutional Official) | |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICE | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print Kenneth G. Devaney, Administrative Director | DATE SIGNED |
| APHIS FORM 7023 (Replaces VS/FORM 18-23 (OCT 88), which is obsolete. | | |

(AUG 91)

Customer ID and Site Address:

Cust ID: 1019

1201 Ninth Avenue Seattle, WA 98101 2795 County: King

Telephone (206)583-6525



This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information

Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0009
CUSTOMER NUMBER: 1020

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Eastern Washington University President'S Office, Ms #130

Telephone: (509)359-2371

Cheney, WA 99004

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | USED BY OR UNDER | CONTROL OF RESEA | RCH FACILITY (Attach addition | onal sheets if necessary or use APHIS Form 7023A) | |
|---|---|--|--|---|--|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | 6 | | ! ! | | 0 |
| 5. Cats | Ò | | | | 0 |
| 6. Guinea Pigs | 0 | | ! | | 0 |
| 7. Hamsters | 0 | | | i | 0 |
| 8. Rabbits | 0 | | | | 6 |
| 9. Non-human Primate | | | : | | 0 |
| 0. Sheep | 0 | | i | | |
| 1. Pigs | 2 | | | | 0 |
| 2. Other Farm Animals | 0 | | | | |
| 3. Other Animals | 0 | | ! | | 0 |
| | | | | Art | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| CERTIFIC | ATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL executive Officer or Legally Responsible Institutional Official) | |
|---|--|-------------|
| SIGNATURE OF C.E.Q. OR/INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| Lla-ll | Stephen M. Jordan, President | 10/13/00 |

Customer ID and Site Address:

Cust ID: 1020

176 Science Building,
-Ms#72 258 SCI
Cheney, WA 99004
County: Spokane

Telephone (509)359-2793

See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0017

CUSTOMER NUMBER: 1022

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

(AUG 91)

Western Washington University 516 High Street - Ms 9038

Telephone:

(360)650-3220

Bellingham, WA 98225

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|--|---|--|---|---|
| 4. Dogs | | | | | |
| 5. Cats | : | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | A ALLEGE CONTROL OF THE PROPERTY OF THE PROPER | | | | |
| 8. Rabbits | | | 5 | | 5 |
| 9. Non-human Primate | : | 5 | | | 5 |
| 0. Sheep | ! | | | | |
| 1. Pigs | | | | | |
| 2. Other Farm Animals | : | | | | |
| 3. Other Animals | | | | | |
| | | | | | |
| | : | | | 15 (A T) 1 5 7 2 | - |
| ASSURANCE STATEMENT | S | | | | |
| actual research, tea 2) Each principal inves 3) This facility is adher investigator and application and applications are seen as a seen and applications. | ching, testing, surgery, of stigator has considered a ring to the standards and proved by the Institution ceptions, this summary i | or experimentation were follo alternatives to painful proced d regulations under the Act, lal Animal Care and Use Com includes a brief explanation facility has appropriate auth | owed by this research facility. dures. and it has required that exception mittee (IACUC). A summary of all of the exceptions, as well as the s | DEC — 2000 s to the standards and regulations be specified and explain such exceptions is attached to this annual report. In additional and number of animals affected. lequate veterinary care and to oversee the adequacy of oth | ned by the principal on to identifying the |
| | | | Officer or Legally Responsible | | |
| SIGNATURE OF C.E.O. OF | enstitutional official has been seen as the seen as th | | Moheb A. Gh | OR INSTITUTIONAL OFFICIAL (Type or Pant lali at for Research | DATE SIGNED |

Customer ID and Site Address:

Cust ID: 1022

516 High Street - Miller

Hall Bellingham, WA 98225 County: Whatcom

Telephone (360)650-3220



See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0018 CUSTOMER NUMBER: 1023

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Veterinary Technology Dept.

Pierce College

9401 Farwest Drive Sw

Telephone:

(253)964-6668

Lakewood, WA 98498

3. REPORTING FACILITY (List all locations where animals were poused or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | O. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|--|--|
| 4. Dogs | 0 | 0 | 13 | 0 | 13 |
| 5. Cats | 0 | 0 | 14 | 0 | 14 |
| 6. Guinea Pigs | 0 | 0 | 0 | 0 | . 0 |
| 7. Hamsters | 0 | 0 | 0 | 0 | 0 |
| 8. Rabbits | 0 | 0 | 0 | 0 | 0 |
| 9. Non-human Primate | 0 | 0 | 0 | 0 | 0 |
| 0. Sheep | 0 | 0 | 0 | 0 | 0 |
| 1. Pigs | 0 | 0 | 0 | 0 | 0 |
| 2. Other Farm Animals | | 3 | 0 | 0 | 3 |
| Goats | 0 | 2 | 0 | 0 | 2 |
| 3. Other Animals | 0 | 0 | 0 | . 0 | 0 |
| | | | | The same of the sa | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility. NOV - 2 2000
- 2) Each principal investigator has considered alternatives to painful procedures.

3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report in addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of admits affected.

3) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care.

| / / | Y HEADQUARTERS RESEARCH FACILITY OFFICIAL Officer or Legally Responsible Institutional Official) | |
|---|--|-------------|
| SIGNATURE OF CEO. OF INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| Mille Muson | Dr. Michele Johnson, President | 10/30/2000 |

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM 18-23 (OCT 88), which is obsolete

This report is required by law (7 USC 2143). Failure to report according to the regulations

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0023 CUSTOMER NUMBER: 1024

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Central Washington University

400 E. 8th Avenue

Telephone: (509)963-3101

Ellensburg, WA 98926

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. | В. | Number of | C. | Number of | D. | Number of animals | | Number of animals upon which teaching, | F. |
|---|----|--|--|--|----|---|---|--|--|
| Animals Covered By The Animal Welfare Regulations | | animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | | animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | | upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | | experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation or the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | | | | | | | | |
| 5. Cats | | | | | | | | | |
| 6. Guinea Pigs | | | | | | | | | |
| 7. Hamsters | | | | | | | | | · |
| 8. Rabbits | | | | | | 36 | | | 36 |
| 9. Non-human Primate | | | | 5 | | | | 10 14 100 100 100 100 100 100 100 100 10 | |
| 0. Sheep | | | | 9 | | | | | |
| 1. Pigs | : | | | | | | | The second of th | |
| 2. Other Farm Animals | : | | | | | | | | |
| 3. Other Animals | : | | | | | | | Z GOR TO WIR LO | |
| Gerbils | | 2 | | | | 11.7 | | | |
| Hedge Hog | | 1 | | | | | | 00101 0 8880 | |
| ASSURANCE STATEMENT | s | | <u>. </u> | | | | 世 | SO APHIS REAC, AC | |

- actual research, teaching, testing, surgery, or experimentation were followed by this research facility $\frac{1}{2}$
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC), A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| 1 | CATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL Executive Officer or Legally Responsible Institutional Official) | |
|---|--|-------------|
| SIGNATURE CORE OF OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print Richard S. Mack, Interim Associate Vice President for Graduate Studies, Research & | DATE SIGNED |

APHIS FORM 7023

(Replaces VS FORM 18-23, OCT 88), which is obsolete.

Faculty

Customer ID and Site Address:

Cust ID: 1024

400 E. 8th Avenue Ellensburg, WA 98926 County: Kittitas Telephone (509)963-2263

See reverse side for additional information

1-24 W 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include Zip Code)

Fred Hutchinson Cancer Research Center

1100 Fairview Ave. N 98109 Seattle, WA

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional FACILITY LOCATIONS (Siles)

| Columbia | | | | | |
|--|---|--|---|--|---|
| SLU | | | | | |
| REPORT OF ANIMALS USED BY OF A Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | C Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or lests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquitizing drugs were used. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report). | F. TOTAL NO. OF ANIMALS (Cols. C + D + E) |
| 4. Dogs | 33 | 34 | 226 | Pu late | 310 |
| 5. Cats | | | | Ju Hi | d. |
| 6. Guinea Pigs | | 42 | 76 | | 118 |
| 7. Hamsters | | 835 | 0 | | 835 |
| 8. Rabbits | | | | | |
| 9. Non-human Primates | | | | | , |
| 10. Sheep | | | | | |
| 11. Pigs | | | | | |
| 12. Other Farm Animals | | | | | |
| 13. Other Animals | | | | | |
| | | | | | |
| | | | | | |
| | | | | the second secon | |
| ASSURANCE STATEMENTS | | | | | |

- 1) Professionally acceptable standards governing the care, freatment, and use of animals, including approxiate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2). Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of anunal care and use.

| CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) 1 certify that the above is true, correct, and complete (7 U.S.C. Section 2143) | | | | |
|---|--|-------------|--|--|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED | | |
| Lu Smrull | Lee Hartwell, PhD President & Director | 11280 | | |

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM 18-23 (OCT 88), which is obsolete)

See attached form for additional information

Interagency Report Control No.

| UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE | certificate number: 91-R-0029 customer number: 1027 | FORM APPROVED OMB NO. 0579-0036 |
|--|---|------------------------------------|
| ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT) | Neorx Corporation 410 W. Harrison St. Seattle, WA 98119 | Telephone: (206)281-7001 |

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|--|
| 4. Dogs | | | | | 0 |
| 5. Cats | | | | | 0 |
| 6. Guinea Pigs | | | | | 0 |
| 7. Hamsters | | | | | 0 |
| 8. Rabbits | | | | | 0 |
| 9. Non-human Primate | | i i | | | 0 |
| 0. Sheep | | | | | 0 |
| 1. Pigs | | | | | 0 |
| 2. Other Farm Animals | | | | | 0 |
| 3. Other Animals | | | | | 0 |
| | | | | | |
| , | | | | 141 | |
| ASSURANCE STATEMENTS | 3 | | | | *** |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquillzing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be-specified and explained by the pericipal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| | DQUARTERS RESEARCH FACILITY OFFICIAL r or Legally Responsible Institutional Official) | |
|---|---|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| Laren Audit one-Hargeaves | Karen Auditore-Hargreaves, Ph.D. | 9/29/00 |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

Customer ID and Site Address:

Cust ID: 1027

410 W. Harrison St. Seattle, WA 98119 County: King

Telephone (206)281-7001

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

10-16 CO

This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0030 CUSTOMER NUMBER: 1028

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

VMRD, Inc. P. O. Box 502

Telephone:

(509)334-5815

Pullman, WA 99163

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|--|---|---|---|--|
| 4. Dogs | | | : | |
| 5. Cats | | i | | |
| 6. Guinea Pigs | | | | |
| 7. Hamsters | | ! | | : |
| 3. Rabbits | | | | |
| 9. Non-human Primate | | | | - |
| 0. Sheep | | | | |
| 1, Pigs | | | | |
| 2. Other Farm Animals | | | Co | I MILLU INTO |
| ·- Horses | 4 | | 1. | ** A O |
| 3. Other Animals | | | | 10-10-00 |
| ∵~ Goats | 14 | | | 140 |
| ~ Cow | 1 | | | 10 |
| | | | | |
| ASSURANCE STATEMENT | S | | | |
| actual research, tea 2) Each principal inve 3) This facility is adhe investigator and ap IACUC-approved ex | iching, testing, surgery, stigator has considered ring to the standards ar proved by the Institutio (ceptions, this summary | ning the care, treatment, and use of animals, including appropr or experimentation were followed by this research facility. alternatives to painful procedures. Index regulations under the Act, and it has required that exception hal Animal Care and Use Committee (IACUC). A summary of all includes a brief explanation of the exceptions, as well as the self-acility has appropriate authority to ensure the provision of additional CERTIFICATION BY HEADQUARTERS RESEAR (Chief Executive Officer or Legally Responsible) | s to the standards and regulations be specified and explain such exceptions is attached to this annual report. In addition pecies and number of animals affected. PEAL AC lequate veterinary care and to oversee; the adequacy of othe CH FACILITY OFFICIAL | ifect force; PLL DAG ed by the principal n to identifying the |
| SIGNATURE OF C.E.O. OF | R INSTITUTIONAL OFFIC | | ORINSTITUTIONAL OFFICIAL (Type or Print ams, D.V.M., Ph.D. | DATE SIGNED |

President

Customer ID and Site Address:

Cust ID: 1028

Nw.145:State:Stx
Pullman, WA 99163
County: Whitman

Telephone (509)334-5815

Laboratory Facility: 4641 Pullman-Albion Rd. Pullman, WA 99163 County: Whitman Phone: (509)334-5815

Farm Facility: 4202 Wawawai-Pullman Rd. Pullman, WA 99163 County: Whitman

See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0031
CUSTOMER NUMBER: 1029

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Immunex Corporation 51 University Street Seattle, WA 98101

201 ERRIOTT AVE W Seattle, WA

Telephone: (206) -587-0430

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | JSED BY OR UNDER | CONTROL OF RESEAR | CH FACILITY (Attach addition | al sheets if necessary or use APHIS Form 7023A) | |
|---|---|---|--|--|---|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the | |
| 4. Dogs | \Diamond | 0 | | 0 | 0 |
| 5. Cats | 0 | 0 | 0 | 0 | 0 |
| 6. Guinea Pigs | 0 | 0 | 0 | 0 | |
| 7. Hamsters | 0 | 0 | 0 | 0 | 0 |
| 8. Rabbits | 0 | 0 | | 0 | 0 |
| 9. Non-human Primate | 0 | 0 | 0 | 0 | 0 |
| 0. Sheep | 0 | 0 | 0 | 0 | 0 |
| 1. Pigs | 0 | 0 | 0 | 0 | |
| 2. Other Farm Animals | 0 | 0 | 0 | 0 | 0 |
| 3. Other Animals | 0 | 0 | 0 | | 0 |
| | | | | | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic; analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal control of the control of

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) | | | | | | |
|---|--|-------------|--|--|--|--|
| SIGNATURE OF C. FO. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED | | | | |

APHIS FORM 7023 (AUG 91) (Replaces VS FORM 18-23 (OCT 88), which is obsolete.

Customer ID and Site Address:

ID 1029

201 Elliott Ave Suite 20 Seattle, WA 98119 County: King Telephone (206)587-0430



All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

This report is required by law (7 USC 2143). Failure to report according to the regulations can

See attached form for additional information

Interagency Report Control No. - - CO

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0032

CUSTOMER NUMBER: 1030

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Snbl Usa Biosupport, Ltd. 14716 N E 87th St.

Telephone:

(425)861-3515

Redmond, WA 98052

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these ourposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMALS | USED BY OR UNDER | CONTROL OF RESEA | RCH FACILITY (Attach additio | nal sheets if necessary or use APHIS Form 7023A) | |
|--|------------------|---|--|---|--|
| A. Animals Covered By The Animal Welfare Regulations B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | N/A | NIA | NA | NIA | 0 |
| 5. Cats | N/A | N/A | NA | 1 V/A | |
| 6. Guinea Pigs | Ó | 0 | 21 | | 21 |
| 7. Hamsters | NA | 2/A | NA | N/A 15 50 100 | |
| 8. Rabbits | | 209 | 46 | Ö | 25029 |
| 9. Non-human Primate | 0 | 0 | 28 | 0 | 28 |
| 0. Sheep | Ö | 0 | 20 | C | 26 |
| 1. Pigs | à | 1 | 154 | 0 | T57 15 |
| 2. Other Farm Animals | N/A | NA | NA | NA | 0 |
| 3. Other Animals | NA | NA | NA | NA | NA |
| | | | | | |
| | | ! | | | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| | TION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ecutive Officer or Legally Responsible Institutional Official) | |
|--|--|-------------|
| SIGNATURE OF C.E.O.OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| | STEVEN Golfen, MAD PRESIDENT | Mideo |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0032 CUSTOMER NUMBER: 1030

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Snbl Usa Biosupport, Ltd. 14716 N E 87th St.

Telephone:

(425)861-3515

Redmond, WA 98052

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these ourposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|---|
| 4. Dogs | N/A | NIA | NA | NA | |
| 5. Cats | NA | N/A | NIA | N/A | |
| 6. Guinea Pigs | Ö | | 21 | C | 21 |
| 7. Hamsters | NA | NIA | NIA | NIA | 0 |
| 8. Rabbits | ; • | 209 | 46 | Ö | 256 |
| 9. Non-human Primate | 0 | 0 | 26 | C | <u>ae</u> |
| 0. Sheep | Ö | \circ | 20 | C | 26 |
| 1. Pigs | à | i | 154 | 0 | 157 |
| 2. Other Farm Animals | N/A | N/A | N/A | N/A | C |
| 3. Other Animals | NA | NIE | NA | N)A | NA |
| | | | | | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| | CATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL Executive Officer or Legally Responsible Institutional Official) | |
|--|--|-------------|
| SIGNATURE OF C.E.O.OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| | STEER Cityes, Mip President | n/zde |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0032

CUSTOMER NUMBER: 1030

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Snbl Usa Biosupport, Ltd. 14716 N E 87th St.

Telephone:

(425)861-3515

Redmond, WA 98052

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these ourposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| REPORT OF ANIMAL: | S USED BY OR UNDER | CONTROL OF RESEA | RCH FACILITY (Attach addition | onal sheets if necessary or use APHIS Form 7023A) | | |
|--|--------------------|---|--|---|---|--|
| A. Animals Covered By The Animal Welfare Regulations B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) | |
| 4. Dogs | N/A | NIA | NA | N/A | <u> </u> | |
| 5. Cats | I N/A | N/A | NIA | NA | | |
| 6. Guinea Pigs | .0 | Ċ | 21 | Ö | 21 | |
| 7. Hamsters | NA | NA | NA | NA | | |
| 8. Rabbits | ĺ | 209 | Hic | Ċ | 256 | |
| 9. Non-human Primate | C | 0 | 28 | C | <u>ae</u> | |
| 0. Sheep | 0 | 0 | 30 | C | <u> 26</u> | |
| 1. Pigs | À | } | 154 | 0 | 157 | |
| 2. Other Farm Animals | N/A | NA | N/A | N/A | <u> </u> | |
| 3. Other Animals | NIA | NA | NIA | N)A | NIA | |
| | | | | | | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) | | | | | | | | |
|---|---|-------------|--|--|--|--|--|--|
| SIGNATURE OF C.E.O.OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED | | | | | | |
| | STEER GIVEN, Phip President | pladeo | | | | | | |

This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional cormation

Interagency Report Control

| UNITED | STATES DEPARTMENT OF AGRICULTURE |
|--------|-------------------------------------|
| ANIMAL | AND PLANT HEALTH INSPECTION SERVICE |

1. CERTIFICATE NUMBER: 91-R-0033 CUSTOMER NUMBER: 1031

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Zymo Genetics, Inc.

1201 Eastlake Avenue East

Telephone:

(206)442-6775

Seattle, WA 98102

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Animals Covered By The Animal Welfare Regulations | | Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. | Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs. | D. | Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | conducted involving a to the animais and for anesthetic, analgesic, have adversely affect interpretation of the te surgery, or tests. (An producing pain or disti | on which teaching, n, surgery or tests were ccompanying pain or distress which the use of appropriate or tranquilizing drugs would ed the procedures, results, or eaching, research, experiments, explanation of the procedures ress in these animals and the rere not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|--------------|--|----|---|----------|---|--|--|--|
| 4. Dogs | | | | | | | | | : : 1 |
| 5. Cats | | | | | i | | | | ! |
| 6. Guinea Pigs | Traper are a | | | | : | | | | |
| 7. Hamsters | | The second secon | | | : | | | | : : |
| 8. Rabbits | | | | | - | 78 | : | | 78 |
| 9. Non-human Primate | | | | | | | : | | |
| 0. Sheep | | | | | | | | | |
| 1. Pigs | | | | · | | | | | |
| 2. Other Farm Animals | | | | | | | | | |
| 3. Other Animals | | | | | <u> </u> | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

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- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- nriate authority to

| CERTIFICATIO | DN BY HEADQUARTERS RESEARCH FACILITY OFFICIAL utive Officer or Legally Responsible Institutional Official) | |
|---|--|-------------|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| debra K Seek | Debra K. Leith, VP, Intellectual | 11/16/00 |

APHIS FORM 7023 (AUG 91)

(Replaces VS FORM 18-23 OCT 88), which is obsolete.

Customer ID and Site Address:

Cust ID: 1031

1201 Eastlake Avenue

East

Seattle, WA 98102 County: King

Telephone (206)442-6775

See attached form for additional information Interagency Report Control No.:

FORM APPROVED UNITED STATES DEPARTMENT OF AGRICULTURE 1. CERTIFICATE NUMBER: 91-R-0036 OMB NO. 0579-0036 ANIMAL AND PLANT HEALTH INSPECTION SERVICE CUSTOMER NUMBER: 1032 ANNUAL REPORT OF RESEARCH FACILITY Seattle Biomedical Res. Inst.

(TYPE OR PRINT)

4 Nickerson Street, Suite #200

Telephone:

(206)284-8846

Seattle, WA 98109

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Animals Covered By The Animal Welfare Regulations | В. | Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. | Number of animats upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs. | D. | Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, matgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUME OF ANIMAL (COLUM! C + D + E |
|---|-----|---|-----|---|-------------|---|---|--|
| 4. Dogs | | | | | - | | | <u>.</u> |
| 5. Cats | | | | | | | | |
| 6. Guinea Pigs | | | | | | | | : |
| 7. Hamsters | | | | | | | | |
| 8. Rabbits | | | | | | | | |
| 9. Non-human Primate | | | | | | | | |
| 0. Sheep | | | | | | | | |
| 1. Pigs | | | | | | | | |
| 2. Other Farm Animals | | | | | | | | |
| 3. Other Animals | : | | | | | | | |
| | | | | | · | | | <u>i</u> |
| No cover | ed_ | animals w | ere | used dur | ing | this period. | | _ |
| ASSURANCE STATEMENT | S | | Щ | | | | | |

- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

| 4) The attending veterinarian for this research facility has appropriate authority | to ensure the provision of adequate veterinary care and to oversee the adequacy of o | other aspects of animal ca |
|--|---|----------------------------|
| | ADQUARTERS RESEARCH FACILITY OFFICIAL per or Legally Responsible Institutional Official (| |
| | Thans 2 TITLE OF C.E.O. OD INSTITUTIONAL SERIOM (Transaction) | IDATE SIGNED |
| SIGNATURE OF C.E O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL SEPICIAL (Type or Print Kenneth D. Stuart, Ph.D., Director | 11/13/00 |

APHIS FURM 7023

(Replaces VS FORM 18-23 OCT 88), which is obsolete

Customer ID and Site Address:

Cust ID: 1032

4 Nickerson Street, Suite #200

Seattle, WA 98109

County: King

Telephone (206)284-8846

This report is required by law (7 USC 2143). Failure to report according to the regulations çan

See attached form for additional information

CC: KKu

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0037

CUSTOMER NUMBER: 1033

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Icos Corporation

22021 - 20th Avenue Se

Telephone:

(226)485-1900

Bothell, WA 98021

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. | Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | . D. | Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|----|---|---|------|---|---|--|
| 4. Dogs | | | | | | | |
| 5. Cats | - | | | | | | · · · · · · · · · · · · · · · · · · · |
| 6. Guinea Pigs | | | | | 39 | 1 | 39 |
| 7. Hamsters | : | | 41 | : | | | 41 |
| 8. Rabbits | | | 10 | | | | iD |
| 9. Non-human Primate | | | | : | | i | |
| 0. Sheep | : | | | i | | | |
| 1. Pigs | | | | ; | | | |
| 2. Other Farm Animals | | | | | | | |
| 3. Other Animals | | | | | | | |
| | | | | | | | |
| ASSURANCE STATEMENT | S | | | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

11/21/00

Paul N. Clark, President & CEO

Customer ID and Site Address:

Cust ID: 1033

22021 - 20th Avenue S Bothell, WA 98021 County: King Telephone (425)485-1900

NOV 2 2 2000

See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0039

CUSTOMER NUMBER: 8220

FORM APPROVED OMB NO. 0579-0036

15-15-5

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Walla Walla Fire Dept.

200 S. 12th Ave.

Telephone:

(509)527-4429

Walla Walla, WA 99362

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

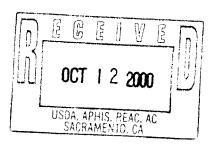
FACILITY LOCATIONS (Sites) - See Atached Listing

| Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of arimals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, ressarch, surgery or tests were conducted involving accompanying pain or distres to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experimer surgery, or tests. (An explanation of the procedure producing pain or distress in these animals and the reasons such drugs were not used must be attach | e OF ANIMALS or (COLUMNS res C+D+E) |
|---|---|---|--|---|---------------------------------------|
| 4. Dogs | Ø | Ø | Ø | \varnothing | D |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | | : | |
| 7. Hamsters | | | | | : |
| 8. Rabuits | | | | | |
| 9. Non-numan Primate | | | | | |
| 0. Sheep | | | | | |
| 1. Pigs | | | : | | : |
| 2. Other Farm Animals | | | | | |
| 3. Other Animals | | | | | |
| | i | | | | |
| | <u> </u> | | | 19 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | · · · · · · · · · · · · · · · · · · · |
| ASSURANCE STATEMENT | | | | 11.77 | an arianta during and falls |
| 2) Each principal inves3) This facility is adhernously investigator and ap | stigator has considered ring to the standards an proved by the Institution | alternatives to painful prod d regulations under the Ad Ial Animal Care and Use Co | edures. t, and it has required that exception ommittee (IACUC). A summary of a | ons to the standards and regulations be specified and endisone exceptions is attached to this annual report. In a | xplained by the principal |
| | | | | e spe <mark>cies and number of animals affected.</mark> adequate veterinary care and to oversee the adequacy o | of other aspects of animal ca |
| | | | BY HEADQUARTERS RESEA ve Officer or Legally Responsi | | |
| SIGNATI RE OF C E GIOF | RINSTITUTIONAL OFFIC | Captair | 1 | o. or institutional official (Type or Print Pinza Captain/Paixemedic | DATE SIGNED |

Customer ID and Site Address:

Cust ID: 8220

200 S. 12th Ave. Walla Walla, WA 99362 County: Walla Walla Telephone (509)527-4429



UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

FORM APPROVED OMB NO. 0579-0036

CONTINUATION SHEET FOR ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Walla Walla Fire Department 2005. 12th Ave Walla Walla, WA 99362

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA

| REPORT OF ANIMALS USED BY O | R UNDER CONTROL | OF RESEARCH FACILITY | (Attach adiditional sheets if ne | cessary or use this form.) | |
|---|--|---|---|--|---|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing experiments, research, or surgery but not | conducted involving no pain, distress, or | D Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or | the procedures producing pain or distress in these | TOTAL NO. OF ANIMALS (Cols. C + D + E) |
| 12 &/OR 13. Other (List by species) | yet used for suct purposes. | use of pain- relieving drugs. | tranquilizing drugs were used. | animals and the reasons such drugs were not used must be attached to this report). | |
| | Q | 2 | Ø | Ø | 0 |
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| ASSURANCE STATEMENTS | <u> </u> | | | 1,1808186 | |

1). Professionally acceptable standards governing the care, treatment, and use of animals, including approriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2). Each principal investigator has considered afternatives to painful procedures

3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is a such exceptions as well as the steeless and regulations, this summary includes a brief explanation of the exceptions as well as the steeless and regulations of animals diffected.

4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary-care and to oversee the adequacy of other aspects of animal care and use

CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

DATE SIGNED

APHIS FORM 7023A (AUG 91)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

T. Pinza, Captam/RummedicCoord. 10

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

Interagency Report Control No.

This report is required by law (7 USC 2143). Failure to report according to the regulations

additional information

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0040

FORM APPROVED OMB NO. 0579-0036

micke he

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Clouded Leopard Research & Cons. Project

8221

324 West Gibbs Rd.

CUSTOMER NUMBER:

Telephone:

(509)448-1612

Spokane, WA 99224

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) | |
|--|---------------|---|--|---|--|--|
| 4. Dogs | \mathcal{C} | <u> </u> | \mathcal{O} | \circ | \mathcal{C} | |
| 5. Cats | 1 | | | 1 |) | |
| 6. Guinea Pigs | | | | | | |
| 7. Hamsters | | | | · | | |
| 8. Rabbits | | | | | | |
| 9. Non-human Primate | | | | / | | |
| 0. Sheep | | | | | | |
| 1. Pigs | | | | | | |
| 2. Other Farm Animals | | | | | | |
| 3, Other Animals | 0 | Ċ | S | 6 | <u></u> | |
| | | | | | | |
| ASSURANCE STATEMENTS | | | | 12/6/6/6/6/6/6 | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs; prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.

3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the In:CUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

| | ON BY HEADQUARTERS RESEARCH FACILITY OFFICIAL cutive Officer or Legally Responsible Institutional Official) | |
|--|--|--------------|
| SIGNATURE OF CEROPR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | IDATE SIGNED |
| for thater Dum | FRED RUNKER, PUES. | 11-4-00 |

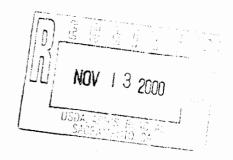
APHIS F GRM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

Customer ID and Site Address:

Cust ID: 8221

324 West Gibbs Rd. Spokane, WA 99224 County: Spokane Telephone (509)448-1612



UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0042

CUSTOMER NUMBER: 1035

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)

Reproductive Assays Lab.

Puget Sound Hospital/P O Box 8550

Telephone:

(253)473-6713

Tacoma, WA 98418

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| The second secon | · · · · · · · · · · · · · · · · · · · | | | nal sheets if necessary or use APHIS Form 7023A) | |
|--|---|---|--|---|---|
| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | 0 | 0 | 0 | . 0 | 0 |
| 5. Cats | 0 | O | O | 0 | 0 |
| 6. Guinea Pigs | 0 | 0 | 0 | 0 | 0 |
| 7. Hamsters | 35 | Ü | 95 | 0 | 95 |
| 8. Rabbits | 0 | Ú | 0 | 0 | . 0 |
| 9. Non-human Primate | 0 | 0 | 0 | 0 | . O |
| 0. Sheep | . <u>o</u> | ی | 0 | 0 | ٥ |
| 1. Pigs | Ö | 0 | 0 | 0 | 0 |
| 2. Other Farm Animals | 0 | 0 | 0 | O | 0 |
| 3. Other Animals | Ø | 0 | 0 | 0 | Ö |
| | | | | | |
| ASSURANCE STATEMENTS | 3 | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and trained litzing drugs, prior to, during, and follows actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 2) sach principal investigator has considered alternatives to painful procedures.

 USDA, APHIS, REAC, AC

 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations by specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the 14CUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

| 4) The attending veterinarian for this research facility has appropriate authority to | ensure the provision of adequate veterinary care and to ov | ersee the adequacy of other aspects of animal ca |
|---|---|--|
| | DQUARTERS RESEARCH FACILITY OFFICIAL or or Legally Responsible Institutional Official) | 9-25-90/1:30 PM Dr. Toseph |
| SIGNATURE OF C.E.D. OR INSTITUTIONAL OFFICIAL. | NAME & TITLE OF C.E.O. OR INSTITUTIONAY OFFICIAL (Teff. A. KOD. Me TTE (abordory Suparits | |

(Replaces VS FORM 18-23 (OCT 88), which is obsolete

Customer ID and Site Address:

Cust ID: 1035

Puget Sound Hospital Tacoma, WA 98408 County: Pierce Telephone (253)473-6713



See attached form for additional information

Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0043

CUSTOMER NUMBER: 1036

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Bio Res. Laboratories, Inc. 2897 152nd Ave. Ne

Telephone:

(425)869-4224

Redmond, WA 98052

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Α. | В. | Number of animals being | C. | Number of animals upon | D. | Number of animals upon which | Number of animals upon which teaching, experiments, research, surgery or tests were. | F. |
|---|----|---|----|---|----|--|--|---|
| Animals Covered By The Animai Welfare Regulations | | bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | | which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | : | experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | TOTAL NUMBER OF ANIMALS (COLUMNS C+D+E) |
| 4. Dogs | : | | | | | | | |
| 5. Cats | | | | | | | 1 | |
| s. Guinea Pigs | | | | | | | : | |
| 7. Hamsters | | | | | : | | | · ! |
| 8. Rabbits | | | | 14 | : | | | 14 |
| 9. Non-human Primate | | | | | - | | | : |
| 0. Sheep | | | | | | | | |
| 1. Pigs | | | | | | | | |
| 2. Other Farm Animals | | | | | | | | |
| 3. Other Animals | | | | | | · · · · · · · · · · · · · · · · · · · | | <u> </u> |
| Fish | | | 9 | 5450 | : | • | | 5,450 |
| Kats | | | | 319 | | ····· | | 319 |
| Mice. | | | | 424 | : | | | 424 |
| ASSURANCE STATEMENTS | | | | | | | | |

2) Each principal investigator has considered alternatives to painful procedures.

3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

DATE SIGNED

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL Gype or Print John J. Majnarich Ph. D. President + Scientific Dire

11/8/00

This report is required by law (7 USC 2143). Failure to report according to the regulations

See attached form for additional information Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0045

CUSTOMER NUMBER:

1250

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Pathogenesis Corporation 201 Elliott Ave. W, Suite 150

Telephone:

(206)270-3307

Seattle, WA 98119

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|--|--|---|--|
| 4. Dogs | 0 | 0 | 0 | 0 | 0 |
| 5. Cats | 0 | 0 | 0 | 0 | 0 |
| 6. Guinea Pigs | 0 | 0 | 0 | 0 | 0 |
| 7. Hamsters | 0 | 0 | 0 | 0 | 0 |
| 8. Rabbits | 0 | 0 | 0 | <i>Q</i> | 0 |
| 9. Non-human Primate | 0 | 0 | 0 | 0 | 0 |
| 0. Sheep | 0 | 0 | 0 | 0 | . 0 |
| 1. Pigs | 0 | 0 | 0 | 0 | 0 |
| 2. Other Farm Animals | 0 | 0 | 0 | 0 | O |
| 3. Other Animals | 0 | 0 | 0 | 0 | O |
| | <u> </u> | of the state of th | | | |
| | | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

| | ON BY HEADQUARTERS RESEARCH FACILITY OFFICIAL utive Officer or Legally Responsible Institutional Official) | |
|---|---|-------------|
| (Cities Exec | 17 A | |
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| | Sean Larce A The Chiron Chairman and Chief Executive Officer | 17 NOV |

Customer ID and Site Address:

Cust ID: 1250

201 Elliott Ave. W, Suit 150

Seattle, WA 98119 County: King Telephone (206)270-3307

can

additional information

Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0046

1256

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Multicare Endosurgery Institute Of Mhs /DSOT

P. O. Box 5299 MS: C1-DST

Telephone:

(206)552-1345

Tacoma, WA 98415

CUSTOMER NUMBER:

3, REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Α. | В. | Number of animals being | C. | Number of animals upon | D. | Number of animals upon which | Number of animals upon which teaching, experiments, research, surgery or tests were | F. |
|---|----|--|--|---|----|--|--|---|
| Anunals Covered By The Animal Welfare Regulations | : | conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | | which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | | experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | TOTAL NUMBE OF ANIMALS (COLUMNS C + D + E) |
| 4. Dogs | | | | | | | | |
| 5. Cats | | | | 4 · · · · · · · · · · · · · · · · · · · | | | AND AND ALL AND AND ALL AND AL | |
| 5. Guinea Pigs | | | | | | | | |
| 7. Hamsters | | | The same of the sa | · · · · · · · · · · · · · · · · · · · | | | | |
| 3. Rabbits | | | | | • | | | |
| 9. Non-human Primate | : | | | | | | | : |
| 0. Sheep | | | | | | | : | : |
| 1. Pigs | | | | | | 15 | | 15 |
| 2. Other Farm Animals | | | | | | | | |
| 3. Other Animals | : | AND 18 8 8 11 11 12 11 11 11 11 11 11 11 11 11 11 | | | | | : | · · · · · · · · · · · · · · · · · · · |
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| | : | | | | | | 200 3 D 3 D 5 | |
| ASSURANCE STATEMENT | s | | | | | | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) dach principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the ACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL

(Chief Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print Diane E. Cecchettini

President and CEO, MultiCare Health System

DATE SIGNED 11/13/00

APHIS TORM 7023

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIA

(Replaces VS FORM 18-23 - OCT 98), which is obsolete

Oustomer ID and Site Address:

Cust ID: 1256

Jones Animal Hospital 3322 South Union Ave. Tacoma, WA 98409 County: Pierce Telephone (206)552-1345



Interagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0047 CUSTOMER NUMBER: 1268

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Children's Hosp & Reg Med Ctr

P. O. Box 5371

Telephone: (206)526-2000

Seattle, WA 98105

3. REPORTING FACILITY (List all locations where anim his were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Animals Covered By The Animal | | Number of animals being bred, conditioned, or held for use in | C. | Number of animals upon which teaching, research, experiments, or | D. | Number of animals upon which experiments, teaching, research, surgery, or tests were conducted | E. | Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would | F. TOTAL NUMBER OF ANIMALS |
|--|---|---|----|--|--|--|----|---|--|
| Welfare Regulations teaching, testing, experimer research, | • | tests were conducted involving no pain, distress, or use of pain- relieving drugs. | | involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | (COLUMNS C + D + E) | | | |
| 4. Dogs | | | - | | | | İ | | |
| 5. Cats | | | • | | | | : | | |
| 6. Guinea Pigs | | | 1 | | | | | | |
| 7. Hamsters | | | | | | | | | : |
| 8. Rabbits | | | | | | | | | |
| 9. Non-human Primate | | . | | | | | | | |
| 0. Sheep | | | | | : | | : | | : |
| 1. Pigs | | | | | - | | | | |
| 2. Other Farm Animals | | | 1 | | | | | . = | - e- |
| | | | | | | | | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| 3. Other Animals | | | 1 | | | | | the free commence of the | \i\ |
| TERBIL S | | | | | : | 16 | | | 1/6 |
| | | | | | | | | | |
| | | | | | | | | AC Speeds, AC | |
| ASSURANCE STATEMENTS | s | | · | | | | | | |

- t) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered at amatives to painful procedures.
- 3) This facility is adhering to the standards and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC), A summary of all such exceptions is attached to this annual report. In addition to identifying the HCUC-approved exceptions, this summary in Tudes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.D. OR NSTITUTIO NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

RESIDENT

FORM APPROVED

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0048 CUSTOMER NUMBER: 1281

OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Sonus Pharmaceuticals, Inc.

22026 20th Avenue Se

Telephone:

(206)487-9500

Bothell, WA 98021

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|--|
| 4. Dogs | ϕ | | - | | ϕ |
| 5. Cats | ø | _ | _ | | Ø |
| 6. Guinea Pigs | φ | - | | : | Ø |
| 7. Hamsters | φ | _ | | | Ø |
| 8. Rabbits | ϕ | | : | - | φ |
| 9. Non-numan Primate | $\dot{\phi}$ | | | | Ø |
| 0. Sheep | ø | _ | | | ϕ |
| 1. Pigs | ϕ | | | | Ø |
| 2. Other Farm Animals | | | 1 | | |
| | | | | | |
| 3. Other Animals | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo ${\it actual}\ research,\ teaching,\ testing,\ surgery,\ or\ experimentation\ were\ followed\ by\ this\ research\ facility.$
- 2) Each principal investigator has considered alternatives to painful procedures.
- 2) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

| 4) The attending veterinarian for this research facility has ap | propriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca |
|---|---|
| | FICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL ef Executive Officer or Legally Responsible Institutional Official) |
| SIGNATURE OF CE O. OR INSTITUTIONAL DEFICAL | MICHAEL A. MANTIN RESIDENT CED 10/25/08 |
| APRIS FORM 7023 (Replaces VS FORM 18-23 (OCT 88), w | |

Customer ID and Site Address:

Cust ID: 1281

22026 20th Avenue Se Bothell, WA 98021 County: King

Telephone (206)487-9500

E. Number of animals upon which teaching,

experiments, research, surgery or tests were

conducted involving accompanying pain or distress

to the animals and for which the use of appropriate

C. Number of

(Replaces VS FORM 18-23 - OCT 88), which is obsolete.

animals upon

research.

which teaching,

Interagency Report Control No.

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE 1. CERTIFICATE NUMBER: 91-R-0049 CUSTOMER NUMBER: 1284

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

B. Number of

bred.

animals being

conditioned, or

Α.

Animals Covered

APHIS FORM 7023

(ACIG 91)

Targeted Genetics Corporation 1100 Olive Way, Suite #100

Telephone:

(206)623-7612

F.

TOTAL NUMBER

OF ANIMALS

Seattle, WA 98101

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

D. Number of animals

upon which

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

FACILITY LOCATIONS (Sites) - See Atached Listing

experiments, teaching,

research, surgery, or

| By The Animal Welfare Regulations | held for use in teaching, testing, experiments, research, or surgery but not y | experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs. | tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | (COLUMNS C + D + E) |
|--------------------------------------|--|--|---|--|-------------------------|
| 4. Dogs | 0 | 0 | 0 | 0 | |
| 5. Cats | 0 | 0 | 0 | | 0 |
| 6. Guinea Pigs | | 0 | 0 | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | 0 |
| 7. Hamsters | 0 | 0 | 0 | 0 | 0 |
| 8. Rabbits | 0 | | 0 | | O |
| 9. Non-human Primate | 0 | 0 | 0 | 0 | 0 |
| 0. Sheep | 0 | 0 | 0 | 0 | 0 |
| 1. Pigs | 0 | 0 | 0 | 0 | 0 |
| 2. Other Farm Animals | 0 | 0 | 0 | Ò | O |
| | 0 | 0 | 0 | 0 | 0 |
| 3. Other Animals | 0 | 0 | 0 | 0 | <u> </u> |
| | | | | | |
| | | <u> </u> | | | |
| ASSURANCE STATEMENTS | in the device any orning | " tractant and | A least landading appropri | into use of approving a Williams and transmitting drugs prior | · · and fallo |
| | | | use of animals, including appropria owed by this research facility. | iate use of añêstetic, añālgesic, and tranquilizing drugs, prior | to, during, and iono |
| 2) Each principal investiç | gator has considered alte | ernatives to painful proced | iures. | OCT - 2000 12 | |
| investigator and appro | oved by the Institutional A | Animal Care and Use Comr | nmittee (IACUC). A summary of all s | s to the standards and regulations be specified and explained such exceptions is attached to this annual report. In addition to pecies and number of animals affected. | |
| 4) The attending veterina | irian for this research fac | allity has appropriate autho | ority to ensure the provision of ade | lequate veterinary care and to oversee the adequacy of other a | spects of animal ca |
| | | | Y HEADQUARTERS RESEARC Officer or Legally Responsible | | |
| SIGNATURE OF C.E.O. OR IN | NSTAUTIONAL OFFICIAL | | 1 | OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| 1 NXXX | 11/ | | H. Stewart F | Parker | 9/29/00 |

۸èport Site Listing:

ustomer ID and Site Address:

Cust ID: 1284

1100 Olive Way, Suite #100

Seattle, WA 98101 County: King Telephone (206)623-7612



This report is required by law (7 USC 2143). Failure to report according to the regulations

additional information

| UNITED STAT | ES DEPARTMEN | T OF AGRIC | ULTURE |
|--------------|-----------------|------------|---------|
| ANIMAL AND I | PLANT HEALTH II | NSPECTION | SERVICE |

1. CERTIFICATE NUMBER: 91-R-0051

CUSTOMER NUMBER: 1722

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT)

Yakima Valley Community College

P.O. Box 22520

Telephone: (509)837-2478

Yakima, WA 98907

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

YVCC Technology Building ROOMS THOG/H

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|--|
| 4. Dogs | 0 | 44 | 49 | () | 93 |
| 5. Cats | | 28 | 24 | 0 | 52 |
| 6. Guinea Pigs | 0 | 2 | · · | 0 | , a |
| 7. Hamsters | 0 | _ 0 | 0 | C | 0 |
| 8. Rapbits | 0 | <u> </u> | 0 | ·· O | , Ü |
| 9. Non-human Primate | 0 | <u>Ö</u> | 0 | C | · <u> </u> |
| 0. Sheep | 0 | <u> </u> | 0 | C | <u> </u> |
| 1. Pigs | ·O | 0 | O | 0 | 6 |
| 2. Other Farm Animals | 0 | | 0 | 0 | 0 |
| 3. Other Animals | O | 0 | 0 | | 0 |
| | | | T MANAGE TO THE STATE OF THE ST | | |

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo actual research, teaching, testing, surgery, or experimentation were followed by this research facility: OCT | 2 2000
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptio和智语的电话,他的is annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and ក្រុណ្ឌវិត្តខ្ពស់ គឺភ្នំគ្រោងនៃ affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal ca

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official)

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Linda Kaminski

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

Customer ID and Site Address:

Cust ID: 1722

1107 S 14th Ave. Rm

110 G&H

Yakima, WA 98902 County: Yakima Telephone (509)837-2478



| | | 10-12-00 |
|---|---|------------------------------------|
| This report is required by law (7 USC 2143). Failure to report according to the regulations can | See attached form for additional information | Interagency Report Control No.: |
| UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE | certificate number: 91-R-0052 customer number: 1822 | FORM APPROVED OMB NO. 0579-0036 |
| ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT) | Skeletech 22002 26th Ave, Se; Suite 104 | Telephone: 2663 |
| | Bothell, WA 98021 | Per Rox Ougnat |
| 3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testi | ing, or experimentation, or held for these purposes. Attach | additional sheets if necessary) |

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|--|---|---|--|---|---|
| 4. Dogs | : | | | | |
| 5. Cats | | | | | |
| Guine a Pigs | | 2 | | | ٦ |
| '. Hamste rs | | | | | 3 |
| 3. Rabbits | 3 | | 47 | | 50.47 |
| Non-human Primate | | | | | Per Roy |
| 0. Sneep | | | | | Dagnall |
| 1. Pigs | | | | | tilephone |
| 2. Other Farm Animals | | | | | 10/10/0 |
| 3. Other Animals | | | | | |
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| ASSURANCE STATEMENTS | 3 | | | | 1 |
| actual research, teac 2) Each principal inves 3) This facility is adher investigator and app | thing, testing, surgery, or tigator has considered al ing to the standards and proved by the Institutiona | experimentation were fol ternatives to painful proc regulations under the Act I Animal Care and Use Co | llowed by this research facility. edures. t, and it has required that exception mmittee (IACUC). A summary of all | iate use of anestetic, analgesic, and tranquilizing drugs, prio | d by the principal |
| 4) The attending veteri | narian for this research fa | acility has appropriate au | thority to ensure the provision of a | dequate veterinary care and to oversee the adequacy of other | aspects of animal ca |
| | | | BY HEADQUARTERS RESEAR e Officer or Legally Responsib | | |
| SIGNATURE OF C.E.O. OR APIES FORM 7023 | INSTITUTIONAL OFFICIA | | ROYDAG | OR INSTITUTIONAL OFFICIAL (Type or Print NALL, PRESIDENT + CEO | DATE SIGNED |

+ AUG 91)

See reverse side for additional information Interagency Report Control No. 0180-DOA-AN

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO. 91-R-0052

FORM APPROVED OMB NO. 0579-0036

2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA include Zip Code)

Skeletech 22002 26th Ave. S.E. Soite 104 Bothell, WA 98021

OF RESEARCH FACILITY (TYPE OR PRINT) CONTINUATION SHEET FOR ANNUAL REPORT Skelet 22002

| | B. Number of | C Number of | (Attach adiditional sheets if neo | E. Number of animals upon which teaching, | F |
|---|--|--|---|---|--|
| Animals Covered By The Animal Welfare Regulations 12 &/OR 13. Other (Ust by species) | animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes. | animals upon which feaching, research, experiments, or lests were conducted involving no pain, distress, or use of pain-relieving drugs. | which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used. | experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report). | TOTAL OF ANIM (Cols. D + |
| (Lat. by openies) | | | | | |
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- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including approriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2). Each principal investigator has considered alternatives to painful procedures.
- 3). This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4). The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use

| CERTIFICATION BY HEADQUARTES RESEARCH FACILITY OFFICIAL (Chief Executive Officer or Legally Responsible Institutional Official) Lectify that the above is true, correct, and complete (7 U.S.C. Section 2143). | | | |
|---|--|-------------|--|
| SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print) | DATE SIGNED | |

See attached form for additional information

1/-9-60 Agagency Report Control No.:

UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 91-R-0053

CUSTOMER NUMBER: 11124

FORM APPROVED OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY

(TYPE OR PRINT.)

Snbl Usa, Ltd

6605 Merrill Creek Parkway

Telephone:

(425)407-0121

Everett, WA 98203

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Atached Listing

| A. Animals Covered By The Animal Welfare Regulations | B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not y | C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs. | D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a | E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to | F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E) |
|---|---|---|--|---|--|
| 4. Dogs | | | | | |
| 5. Cats | | | | | |
| 6. Guinea Pigs | | | | | |
| 7. Hamsters | | | | | i |
| 8. Rabbits | 3 | 82 | 3 | | პ5 |
| 9. Non-human Primate | 200 | 286 | 54 | | 340 |
| 0. Sheep | | | | | |
| 1. Pigs | | | | | : |
| 2. Other Farm Animals | | | | | |
| | | | | TONE OF FINES | Tork . |
| 3. Other Animals | | | | | |
| | | | | NOV - 9 | |
| | | | | UST 12-10, AC | |
| ASSURANCE STATEMENTS | | | | USC 1796, AC | |

1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anestetic, analgesic, and tranquilizing drugs, prior to, during, and follo

- actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

 2) Each principal investigator has considered alternatives to painful procedures.

 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal
- investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

| | ON BY HEADQUARTERS RESEARCH FACILITY OFFICIAL cutive Officer or Legally Responsible Institutional Official) | |
|--|--|-------------|
| SIGNATURE OF C.E.O. OR HEATT OF IONAL OFFICIAL | NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print | DATE SIGNED |
| NIUM | Steven L. Rieyer | 11-8-00 |

APHIS FORM 7023

(Replaces VS FORM 18-23 (OCT 88), which is obsolete.

Customer ID and Site Address:

Cust ID: 11124

6605 Merrill Creek

Parkway Everett, WA 98203 County: Snohomish

Telephone (425)407-0121

